Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 07/01/2013 New ; 08/01/13 Renewal Business

-	(1)	(2) Annual Premium	(3) Percent			
	Coverage -	Volume (Illinois) *	Change (+or-) **			
1.	Automobile Liability Private					
	Passenger					
	Commercial					
2	Automobile Physical Damag		•			
	Private Passenger					
	Commercial					
3.	Liability Other Than Auto					
4.	Burglary and Theft					
5.	Glass					
6.	Fidelity					
7.	Surety					
8.	Boiler and Machinery					
9.	Fire					
10.	Extended Coverage					
11.	Inland Marine					
12.	Homeowners					
13.	Commercial Multi-Peril					
14.	Crop Hail					
15.	Other Medical Malpractice	20,308,311	1.5%			
	Life of Insurance					
•	D Ellin - alic - alic to conto	in torritory (tarritorios) or	cortoin			
	Does filing only apply to certain	in termory (termones) or	Ceitairi			
	Classes? If so,					
	specify: No No					
	Brief description of filing. (If filing follows rates of an advisory					
	Organization, specify					
	organization):	Revise class assignments for six specialties and lower				
	the relativity for class 1C	Tevise oldes designific	And for the openiation and forter			
	the relativity for class 10					
	*Adjusted to reflect all prior ra	te changes				
	**Change in Company's prem	ium level which will resu	It from application of new			
	rates.	hange in Company's premium level which will result from application of new				
	Tates.	The Medical Protective Company				
			me of Company			
		4-1	SVP			
			Official – Title			

		SUMMARY SHEET			
		SUMMARY SHEET			
	Change in Company's premium or rate level produced by rate revision effective 07/01/2013 New business, 09/01/2013 Renewals.				
_	(1)	(2)	(3)		
- -	` ,	Annual Premium	Percent		
	Coverage	 Volume (Illinois) * 	Change (+or-) **		
Αι	tomobile Liability Private				
Pa	assenger				
Co	ommercial				
Αι	tomobile Physical Damag				
Pr	ivate Passenger				
Co	ommercial				
Lia	ability Other Than Auto				
	irglary and Theft				
Gl	ass				
Fid	delity				
Sι	ırety				
Bo	oiler and Machinery				
Fir	e				
. Ex	tended Coverage				
. In	and Marine				
. Ho	meowners				
. Co	mmercial Multi-Peril				
. Cr	op Hail				
. Ot	her Medical Malpractice	\$9,650,834	1.1%		
	Line of Insurance				
C	oes filing only apply to certa lasses? If so, pecify:	nin territory (territories) or	certain		
٠,					
Bi	Brief description of filing. (If filing follows rates of an advisory				
	Organization, specify				
	organization): Independent Physicians and Surgeons Rate Filing.				
	egulatory proceedings coverage, adde				

Professional Solutions Insurance Company
Name of Company
Jacqueline Anderson - Corporate Secretary
Official - Title